

**PRIOR APPROVAL FORM  
FOR OUTSIDE ACTIVITIES (CATEGORY I)**

Name \_\_\_\_\_ Department \_\_\_\_\_  
Please print

For each Category I compensated outside professional activity in which you wish to engage in outside professional activities answer the following questions. Attach separate sheets, if necessary.

Type of activity in which you will be involved:

Category I Activities

Executive/managerial role: \_\_\_\_\_

Salaried employee: \_\_\_\_\_

Outside teaching or research activity: \_\_\_\_\_

Other potential conflict of commitment: \_\_\_\_\_

General description of the business/agency/organization/group/individual:

\_\_\_\_\_

Activities/products/services of entity described above: \_\_\_\_\_

Nature of your relationship to entity named above (check all that apply):

Founder/co-founder: \_\_\_\_\_

Owner: \_\_\_\_\_

Consultant: \_\_\_\_\_

Board member: \_\_\_\_\_

Salaried employee: \_\_\_\_\_

Stockholder/partnership interest: \_\_\_\_\_

Equity/royalty interest: \_\_\_\_\_

Other, please explain: \_\_\_\_\_

Description of the nature of your participation in this activity, including, if you wish, possible beneficial outcomes to areas of research, industry, and public service:

\_\_\_\_\_

Beginning/ending month/year you could be involved in this activity: \_\_\_\_\_

Fiscal year(s) for which seeking approval: \_\_\_\_\_ (Approvals are generally for one fiscal year but may be granted for a longer term not to exceed five years. Outside income reports must be submitted annually.)

Estimated number of days= involvement during fiscal-year appointment: \_\_\_\_\_

Do you wish to take a full- or part-time leave while engaged in this activity? \_\_\_\_\_

Approval granted through fiscal year  
ending June 30, \_\_\_\_\_

Request denied: \_\_\_\_\_

\_\_\_\_\_  
Department Chair Date

\_\_\_\_\_  
Dean Date

\_\_\_\_\_  
Faculty Member Signature Date

\_\_\_\_\_  
Chancellor or Chancellor's Designee Date